

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

MICKEY SOCRATES FERDYNAND,

Plaintiff,

Case No. 23-10135

v.

Honorable Nancy G. Edmunds

UNILEVER, *et al.*,

Defendants.

**ORDER DIRECTING PLAINTIFF TO PAY FILING FEE OR SUBMIT
AN APPLICATION TO PROCEED IN FORMA PAUPERIS**

On January 18, 2023, Plaintiff Mickey Socrates Ferdynand filed his pro se complaint against a number of parties in this Court. (ECF No. 1.) Federal law provides that “[t]he clerk of each district court shall require the parties instituting any civil action . . . to pay a filing fee.” 28 U.S.C. § 1914(a). To ensure access to the courts, however, under 28 U.S.C. § 1915(a)(1), a court may authorize the commencement of a civil action without the prepayment of fees or costs (“in forma pauperis” or “IFP”) if the applicant submits an affidavit demonstrating that he or she “is unable to pay such fees or give security therefor.”

Here, Plaintiff has failed to pay the filing fee or file an application seeking in forma pauperis standing. Accordingly, IT IS HEREBY ORDERED that Plaintiff shall, within ten (10) days of the date of this order, either (1) pay the \$402.00 civil case filing fee in full or (2) file an application to proceed in forma pauperis supported by an affidavit or declaration complying with 28 U.S.C. § 1746. A copy of the application to proceed without prepaying fees or costs is attached to this order.

Failure to timely comply with this order will result in the dismissal of this case.

SO ORDERED.

s/Nancy G. Edmunds
Nancy G. Edmunds
United States District Judge

Dated: January 23, 2023

I hereby certify that a copy of the foregoing document was served upon counsel of record on January 23, 2023, by electronic and/or ordinary mail.

s/Lisa Bartlett
Case Manager

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Plaintiff/Petitioner)
v.)
Defendant/Respondent)
Civil Action No. _____

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated, I am being held at:*

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are:

My gross pay or wages are: \$ _____, and my take-home pay or wages are: \$ _____ per
(specify pay period) _____.

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

(a) Business, profession, or other self-employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(b) Rent payments, interest, or dividends	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(c) Pension, annuity, or life insurance payments	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(d) Disability, or worker's compensation payments	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(e) Gifts, or inheritances	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(f) Any other sources	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

4. Amount of money that I have in cash or in a checking or savings account: \$ _____.

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (*describe the property and its approximate value*):

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (*describe and provide the amount of the monthly expense*):

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

8. Any debts or financial obligations (*describe the amounts owed and to whom they are payable*):

Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: _____

Applicant's signature

Printed name